

## **Request for Overtime**

Date:		Plan Check #	
Company	Requesting Overting	ne:	
			New Building
			Addition
			T.I.
Phone:			Build-out
Fax No.			_
Address o	f Job:		
Name of J	ob:		
Contracto	Name:		
examination and Safety our standard Payment	on service. We are y, in the amount of ard plan review fees for this service will	willing to reimburse the City \$100.00 per hour, with a one	ormally requesting the overtime plans or of Las Vegas, Department of Building e-hour minimum. This is in addition to ance of the permit, or within 30 days,
whichever	comes first.		
		SIGNATURE:	
PLOVT BDOPE	Planning Dept Building Dept Architectural Structural Plmb/Mech Electrical Permit Tech.	Hours x \$100.00	per Hr = \$
		Grand To	tal \$
TECH			
□ REVIS	SION   NE	W   BACKCHECK	
Α	S	M/P	_ E
Supervisor		Date	